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CLERK OF STATE
TALLAHASSEE, FLORIDA

K 05/17/11

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: MDM AUTO INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 Filing Fee
☐ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☒ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: Michele D. McKee
Name (Printed or typed)
611 Azalea Oaks Drive.
Address
Orange City, FL 32763
City, State & Zip
518-857-8529
Daytime Telephone number
dandmmckee@yahoo.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: MDM AUTO INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
611 Azalea Oaks Drive
Orange City, FL 32763

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

"Professional Corporation"

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michele McKee - President
Address: 611 Azalea Oaks Dr.
Orange City, FL 32763

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Michele McKee
Address: 611 Azalea Oaks Dr.
Orange City, FL 32763

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Michele McKee
Address: 611 Azalea Oaks Dr.
Orange City, FL 32763

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Michele McKee

Required Signature/Registered Agent

5/7/11

Date

Michele McKee

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Michele McKee

Required Signature/Incorporator

5/7/11

Date

Michele McKee

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TALLAHASSEE, FLORIDA